

7. Food Allergies: _____

8. Any Other Allergies: _____

9. Any Special health conditions: _____

10. Child Has had:
_____ Measles
_____ German Measles
_____ Chicken Pox
_____ Mumps
_____ Whooping Cough
_____ Other _____

11. Child Suffers Form
_____ Headaches
_____ Earaches
_____ Sore Throat
_____ Stomach Aches
_____ Flu/Cold
_____ Other _____

12. Payment Details:

Received with thanks from Mr./ Mrs./Ms. _____

Sum of Rupees _____ on behalf of their Daughter / Son _____

Miss / Master _____ Wide cash / cheque / DD _____

13. Parents consent for the following:

(a) Child's picture to be used for the Green Tree brand promotion. 1. Yes 2.No

(b) Parents email id to be used for sharing Green Tree updates in the future.

1.Yes 2.No

(Authorised Signature) TM
(Green Tree Play School)

(Parent's Signature)

LITTLE INFORMATION ABOUT ME

I Love to (Play specific games/toys, listen to stories etc.)

I dislike _____

I call my Mama _____

I call my Papa _____

I call my Grandpa as _____

I call my Grandma as _____

I call my siblings as _____

If i feel like going to susu/chuchu _____

If i feel like going to potty _____

When i am hungry _____

When i am thirsty _____

I Want to go home _____

My favorite TV program is _____

Kindly put the child in a diaper (if not toilet trained) and make sure to send an extra diaper. in the bag please keep the following:

1. Water bottle
2. Napkins (2)
3. Lunch/Snack box
4. Extra pair of clothes
5. Pin up the handkerchief using child safety pin.